

SENATE THIRD READING

SB 1184 (Cortese)

As Amended May 5, 2022

Majority vote

SUMMARY

Authorizes a health care provider or a health care service plan (health plan) to disclose medical information to a school-linked services (SLS) coordinator, as specified. Defines SLS coordinator as an individual located on a school campus or under contract by a county behavioral health provider agency for the treatment and health care operations and referrals of students and their families that holds specified credentials, including an individual with a pupil personnel services specialization, school nurse, or licensed as a marriage and family therapist, educational psychologist, or clinical counselor

COMMENTS

- 1) The federal Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule provides consumers with important privacy rights and protections with respect to their health information, including important controls over how their health information is used and disclosed by health plans and health care providers. Ensuring strong privacy protections is critical to maintaining individuals' trust in their health care providers and willingness to obtain needed health care services, and these protections are especially important where very sensitive information is concerned, such as mental health information. According to the author, California's Education Code protects health information shared during discussion with educational psychotherapists, other health care providers, or the school nurse, and may be disclosed for the sole purpose of referring the pupil for treatment. The Civil Code needs clarification on what information can be shared to school-based health providers. California's Confidentiality of Medical Information Act (CMIA) authorizes a health care provider or a health plan to disclose medical information in certain circumstances, including by authorizing disclosure to providers of health care, health plans, contractors, or other health care professionals, or facilities for purposes of diagnosis or treatment of the patient. This bill authorizes a health care provider to disclose medical information to a school-linked services coordinator, upon written authorization of the patient.
- 2) SLS Initiative. In 2011, the Santa Clara County Board of Supervisor's President called for County Department heads to develop a plan to implement the SLS Initiative. The goal of SLS is to offer a well-designed model for the delivery of coordinated and effective health and social services on school campuses and in the community. This coordinated effort seeks to meet the needs of students and their families in order for children to achieve success in school and in life. SLS provides students and families with school based coordinated services to improve health and wellbeing of families through a community participatory approach. SLS Coordinators, located at the school district or a school site, develop partnership with schools, public agencies and community based organization in Santa Clara County to improve protective factors, *e.g.*, family relationship, decrease risk-factors, *e.g.*, behavioral and emotional problems, enhance service accessibility and resource linkage, and to support children's success in school and in life.

The author provided information regarding successful outcomes of the SLS program that can be found in the fiscal year 2020 end-of the year survey report:

- a) Most of the 321 families that completed an end-of-year Family Survey reported that the SLS services they received helped them learn more about the services and supports available in their community (75.4%), as well as their health and wellbeing (73.2%);
- b) Most families that completed the Family Survey reported that the SLS services they received improved their ability to find resources for their child (67.0%), helped them advocate for their child (65.4%), and increased their child's academic success (76.3%); and,
- c) The majority (83.3%) of the 12 staff responding to the SLS Superintendent and Supervisor Survey "agree" or "strongly agree" that the SLS model has improved school-family-community partnership. SLS Administrators feel the program's most significant benefits involve connecting diverse community partners in lasting relationships. They also report value in the program's ability to streamline referral processes, which in turn saves families and staff time and resources.

According to the Author

We must expand our statewide strategy to provide school-based mental health services to students and ensure that services provided among various entities are sustainable, equitable, and better coordinated to fill gaps in services that exist for students and support the overall health and well-being of all children. To "close the loop" on community-clinical referrals in school settings and provide improved care coordination for students accessing behavioral health services, this bill would define, under California Civil Code, a "SLS" coordinator as those individuals or entities, including licensed educational psychologists, located on a school campus or under contract by a county behavioral health provider for treatment and health care operations and ensure that these "SLS" coordinators can better refer both students and families to mental health treatment and care.

Arguments in Support

National Alliance of Mental Illness, Santa Clara County writes that this mental health has been a growing concern in our school communities even before distance learning affected our classrooms. Between 2007 and 2014, the suicide rate for children between the ages of 10 to 14 increased drastically. Suicide is now the second leading cause of death for individuals between the ages of 10 and 24. COVID-19 has only exacerbated these existing issues. We must work to improve the way we deliver behavioral health support to our student community, whether it is through partnerships between counties and local school systems or school-site wellness centers so that we can meet the mental health needs of our students. Through the SLS Program, students and families will be connected to mental health counseling, case management, and public health services on district and school site campuses.

Arguments in Opposition

Electronic Frontier Foundation (EFF) states that the CMIA rightly limits access to medical information except in particular cases for particular people. EFF would also like more information on how this law interacts with the federal Family Education Rights and Privacy Act, which already provides for sharing of information with "appropriate" officials in the case of health and safety emergencies, as well as more details on how compliance with HIPAA will be operationalized in this context.

FISCAL COMMENTS

None.

VOTES**SENATE FLOOR: 27-9-4**

YES: Allen, Atkins, Becker, Bradford, Cortese, Durazo, Eggman, Glazer, Gonzalez, Hueso, Hurtado, Kamlager, Laird, Leyva, Limón, McGuire, Min, Newman, Pan, Portantino, Roth, Rubio, Skinner, Stern, Umberg, Wieckowski, Wiener

NO: Bates, Borgeas, Dahle, Grove, Jones, Melendez, Nielsen, Ochoa Bogh, Wilk

ABS, ABST OR NV: Archuleta, Caballero, Dodd, Hertzberg

ASM PRIVACY AND CONSUMER PROTECTION: 9-1-1

YES: Gabriel, Bauer-Kahan, Bennett, Berman, Cunningham, Mike Fong, Irwin, Wicks, Wilson

NO: Kiley

ABS, ABST OR NV: Valladares

ASM HEALTH: 12-2-1

YES: Wood, Aguiar-Curry, Arambula, Carrillo, Maienschein, Mayes, McCarty, Nazarian, Luz Rivas, Rodriguez, Santiago, Akilah Weber

NO: Waldron, Bigelow

ABS, ABST OR NV: Flora

UPDATED

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